

SENATE HIGH	HWAYS AND TRANSPORTATION
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1B 82

Seat Belt Use and Health Care Costs in Mentana Legislative Testimony

Beth E. Ebel, MD, MPH

Good afternoon, Mr. Chairman, esteemed Committee Members, thank you for your consideration of Senate Bill 82, which proposes the adoption of a primary enforcement seat belt law in Montana.

<u>INTRO</u>: My name is Dr. Beth Ebel, pediatric trauma specialist and director of the Harborview Injury Prevention & Research Center at Harborview Medical Center in Seattle, Washington. It is also my privilege to care for seriously injured trauma patients from our 4 state region, including patients from Montana, when they are flown to Harborview Medical Center for care.

Seat belt use is, of course, already required in Montana, and so this bill proposes a change only in the enforcement of the existing seat belt law.

<u>RESEARCH FINDINGS</u>: I would like to share the results of our research, examining the health care costs for unrestrained motor vehicle occupants in Montana, and briefly go over our main findings. These findings are also outlined in a one page handout which should be available to each of you and your staff. Using data from 2004 onwards, we estimated the number of injured Montanans using Montana police crash reports, and determined seat belt use and health care costs using data from the Montana trauma registry, and from Montana patients transferred to Harborview following a motor vehicle crash.

Our study addressed three main questions:

- 1. First, what preventable costs do Montanans taxpayers incur each year to pay for injured, unbelted occupants?
- 2. Second, what is the impact of primary enforcement on seat belt use?
- 3. Third, what savings can be expected with adoption of a primary enforcement seat belt law in Montana?
- 1. What do Montanans pay to subsidize injured, unbelted occupants?
 - Motor vehicle crashes are common, and are the leading cause of injury death. In 2009, 171 Montanans were killed in car crashes. Two-thirds of those killed were unbelted (63%).

- Each year in Montana, an estimated 887 unbelted injured vehicle occupants are hospitalized for care (58% of all admissions following a crash). An estimated 819 admissions might have been prevented if a seat belt had been used.
- Caring for unbelted patients costs the state of Montana over \$42.9 million each year
 in direct inpatient health care costs, which could have been prevented through seat
 belt use.
- \$16.4 million of these preventable healthcare costs for unbelted occupants are paid by Montana state government.
- These costs result from:
 - (1) More hospital admissions
 - (2) More emergency department costs.
 - (3) <u>Higher costs per hospital stay</u>: On average, an unbelted occupant had a longer hospital stay (2.3 days longer), required more intensive care (2.7 days longer) and accrued significantly higher hospital charges of \$59,205 relative to the average belted occupant \$40,690.
 - (4) <u>Unbelted occupants more likely to be uninsured</u>. Over one-third (36%) of unbelted occupants have no health insurance, with Montana picking up the costs.
- 2. Enforcing existing seat belt laws is expected to raise seat belt use by 10 to 15 percentage points.
 - States changing from secondary to primary laws had increased seat belt use, ranging from 6 to 18 percentage points.
 - 15% difference in seat belt use comparing states with primary to secondary enforcement laws
 - Seat belt use increased even in highest risk drivers those most likely to crash (from 54%->92% in BAC>.1 in CA drivers at night)
- 3. Enforcing existing seat belt laws saves lives, reduces injury, and saves money for all Montanans.
- Current seat belt use in Montana has decreased from a high of 80.9% in 2004 to the current rate of 78.9%. Even a modest increase to 90% seat belt use would save \$22.6 million, and will save Montana state tax payers \$8.6 million in health care costs.
- These savings in health costs are only the tip of the iceberg. Using national data, **lifetime** costs of unbelted crash injuries in Montana will cost an additional \$200 million in lost productivity and potential.

SUMMARY:

At first consideration, it may seem that wearing a seat belt is an individual decision, and an individual choice. <u>Those of us who work in trauma centers know better</u>: an unbuckled occupant hurts many others besides himself: children, spouses, family, work and community.

The cost of unbelted occupants is not just an emotional tax on families. When an unbelted person is injured, he or she imposes high financial costs, nearly all of which are paid for by others. We all pay for the decision of a few not to wear a seat belt. We subsidize unbelted occupants through our higher insurance premiums, paying higher federal taxes, and paying higher state taxes. Montana taxpayers pay 43 million each year to subsidize the health care costs of injured, unbelted occupants, \$16.4 million of which comes from the state budget.

The question before you today is to decide whether to support primary enforcement of existing seat belt laws. Please consider this important bill carefully.

Primary enforcement raises seat belt use, prevents needless deaths and injuries, and reduces the financial burden for Montana taxpayers.

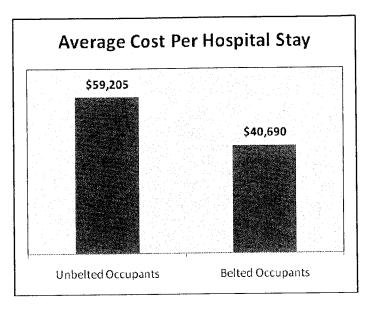
Thank you for the opportunity to share these findings with you, in order to inform your decision.



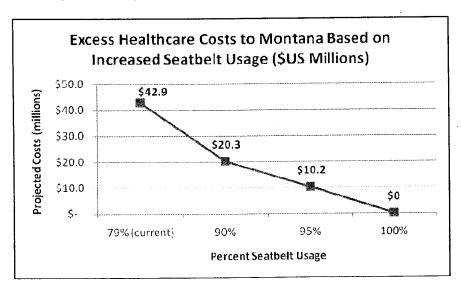
Seat Belt Use and Health Care Costs in Montana

Beth E. Ebel, MD, MPH and Sharon P. Berlin

- From 2005 through 2009, 984 people were killed while driving on Montana roads.
 Over two-thirds (686) of these individuals were unbelted.
- Each year in Montana, an estimated 887
 unbelted injured vehicle occupants are
 hospitalized for care. An estimated 819 of
 these hospital admissions might be
 prevented if a seat belt had been used.
- Caring for unbelted Montana patients costs \$42.9 million each year in direct inpatient health care costs. These costs result from an increase in hospital admissions and higher costs per hospital stay among unbelted occupants.



In Montana, over one-third (36.2%) of unrestrained occupants have no insurance. A significant portion of
hospital costs for unbelted occupants are ultimately paid for by the state, costing Montana over
\$16.4 million annually for the hospital care of their preventable injuries.



• The current price of a seat belt fine is \$20. If unbelted occupants paid higher ticket prices to cover medical expenses, each ticket for an unrestrained occupant would cost \$1,217 to recover Montana state budget health care expenses.